Getting Started

Making the switch to better banking today!

You can make the move to Centennial Bank in three easy steps. Everything you'll need is provided in this handy Switch Kit. We can't wait to welcome you to Centennial Bank, where you'll enjoy a better experience for all your banking needs!

1

Open your new account.

Apply online in minutes or visit your local branch to open your new Centennial Bank account(s).

2

Switch your direct deposits and automatic withdrawals.

If you have any automatic transactions, use the provided forms to seamlessly switch them to Centennial Bank.

3

Close your old account.

Now you're ready to switch. Simply fill out the provided form to close your old account. Any remaining account balance will be transferred to Centennial Bank.





Direct Deposit Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize your employer, retirement and pension funds, or any other agency to deposit your payment directly into your Centennial Bank account. Use one form for each direct deposit.

Notification of Di	irect Deposit Au	thorization C	hange
Company or Employer:			
Address:			
City, State, Zip:			
Phone Number:			
Employee ID: (if applicable)			
Effective immediately, pl	ease deposit the net am	ount of my check t	o my Centennial Bank
account. I authorize (nan	ne of depositor)		
to automatically deposit	funds into the account b	elow. This authoriz	ation shall remain in
place until I have submit	ted a new authorization,	or until this autho	rization is changed or
revoked by me in writing.			
Place an X next to your de	sired option.		
Net amount	to Centennial Bank CHE	ECKING	
Account #		Routing #	084302698
Net amount	to Centennial Bank SAV	INGS	
Account #		Routing #	084302698
Signature:		1	Date:
Name:			
Address:			
City, State, Zip:			
Phone Number:			

Direct Deposit Checklist:

Use this list to remember all your direct deposits you need to transfer. These are the most common direct deposits.

Investments	
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____ Retirement Plans

____ Social Security





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Automatic Withdrawal Authorization

You can use your keyboard to fill out this form online, or you can print the form and complete it by hand.

Use this form to authorize a change to any automatic payment, deductions, or withdrawals from your account. Use one form for each automatic withdrawal. Or, many companies and agencies make it easy to change your account on record online on their website.

Notification of \	Withdrawal Authorization Change
Name of Company:	
Account Number:	
Payment Amount:	
Address:	
City, State, Zip:	
Phone Number:	
Please change my autor	matic withdrawal from the following account:
Financial Institution:	
Account #	Bank Routing #
Please make all future a	automatic withdrawals from the following account:
Financial Institution:	Centennial Bank
Account #	Bank Routing # 084302698
Thank you very much).
	nain in effect until I have submitted to you a new authorization, or until me in writing that this authorization has been changed or revoked.
Signature:	Date:
Name:	
Address:	
City, State, Zip:	
Phone Number:	

Automatic Withdrawal Checklist:

Use this list to remember all your automatic payments you need to transfer. These are some of the most commonly used automatic payments.

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____ Insurance

____ Cable/Internet

____ Gym/Club Memberships

____ Credit Cards

____ Investments

___ Subscriptions

___ Charity Donations





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Account Closure Authorization

You can authorize your remaining balance to be deposited automatically to your new Centennial Bank account(s) or paid by a check forwarded to your mailing address.

Use this form to close your account(s) at your former financial institution. Be sure to verify any outstanding items have cleared your old account.

Notification of Account Closure Authorization				
To Whom It May Conce	ern:			
Financial Institution:				
Address:				
City, State, Zip:				
Please close my accour	nt:			
Account Number:		Primary Owner:		
Address:				
City, State, Zip:				
Please send the remain Place an X next to your desi Please depo Account #				
Account #		Routing #	084302698	
Please forwa	Please forward me a check to my address listed below.			
Primary Signature:			Date:	
Joint Signature:				
Name:				
Address:				
City, State, Zip:				
Phone Number:				

Congratulations!

You had to sign your name a few times...but submitting these forms completes your switch to a truly better banking experience. We can't wait to show you the difference a local partner makes.

Welcome to Centennial Bank!



